



15 Roszel Rd, Ste 105, Princeton, NJ 08540 / P 609.318.5500 / trinityconsultants.com

February 14, 2023

United States Environmental Protection Agency
Region II
Air Compliance Branch
290 Broadway
New York, New York 10007-1866

RE: Atlantic County Utilities Authority (ACUA) – PI Number: 70506
Permit Activity Number BOP210001
Annual Compliance Certification/2nd 2022 Semi-Annual Deviation Revision

To Whom it May Concern:

On behalf of the Atlantic County Utilities Authority (ACUA), Trinity Consultants (Trinity) hereby submits a revision to the 2022 Annual Compliance Certification and second-half 2022 Semi-Annual Deviation for the ACUA - Egg Harbor Township facility. This report is required under Condition 7 and Condition 13 of Subject Item FC of the subject Title V air permit (BOP210001).

As stated in the deviation summary, there were two violations of N.J.A.C. 7:27-22.16(a). There were two sampling events in 2022 which indicated Draeger tube readings higher than 300 ppmv:

- ▶ October 27, 2022: H₂S concentration of 390 ppmv
- ▶ November 3, 2022: H₂S concentration of 600 ppmv

The gas treatment system media was replaced and compliance with the H₂S limit was achieved with the next weekly reading (November 10, 2020) with an H₂S concentration of 210 ppm.

Additionally, there was a deviation from the applicable requirement, FC Reference #3. ACUA received a confirmed odor complaint on 12/28/22 in which residents signed NJDEP "Statements of Complaint" forms which conflicts with N.J.A.C. 7:27-5.2(a). The facility investigated this odor complaint but due to changes in weather conditions, the investigators did not detect the presence of odor at the complaint properties to an enforceable level.

Should you have any questions or require additional information, please contact me at (609) 336-9159 or by email: asmith@trinityconsultants.com

Sincerely,
TRINITY CONSULTANTS

A handwritten signature in black ink that reads "Amanda N. Smith". The signature is written in a cursive, flowing style.

Amanda Smith
Consultant

Attachments

cc: Southern Regional Enforcement Office, NJDEP (Camden, NJ)
Mr. Gary Conover, ACUA (Egg Harbor Twp, NJ)

HEADQUARTERS

12700 Park Central Dr, Ste 2100, Dallas, TX 75251 / P 800.229.6655 / P 972.661.8100 / F 972.385.9203

ATTACHMENT 1
2022 Annual Compliance Certification Revision

Section I - Facility Information

1) Facility Name: Atlantic County Utilities Authority Landfill

2) Program Interest Number (5-Digit): 70506

The permittee shall submit to the Department and to the EPA, a periodic compliance certification, in accordance with N.J.A.C. 7:27-22.19(f) and the schedule for submittal of compliance certifications set forth in the compliance plan of your operating permit. The annual compliance certification is due to the Department and the EPA within 60 days of the expiration of each 1-year anniversary of the Initial Operating Permit Approval Date, unless otherwise specified in your approved operating permit.

3) Submittal Type: Combined (Choose from List)

4) Is this a revision of an already submitted report? Yes (Choose from List)

5) Reporting Year: 2022

6) This report is due: 01/30/2023
(MM/DD/YYYY)

and covers the reporting period from: 01/01/2022 to: 12/31/2022
(MM/DD/YYYY) (MM/DD/YYYY)

7) The methods used to determine the compliance status for each permit limitation are, at a minimum, as specified in the approved operating permit.

Section II - Compliance Certification Statement

Compliance Status for the Reporting Period:

- ☐ a. Pursuant to N.J.A.C. 7:27-22.19(f)1.i, I hereby state that this facility is currently in compliance with all applicable requirements as indicated in the facility specific requirements of my operating permit and has been in continuous compliance for the time period listed in Section I.3 above.
- ☒ b. Pursuant to N.J.A.C. 7:27-22.19(f)1.i, I hereby state that this facility is currently in compliance with all applicable requirements as indicated in the facility specific requirements of operating permit but had periods of non-compliance during the time period listed in Section I.3 above which are listed in the Deviation Summary tab.
- ☐ c. Pursuant to N.J.A.C. 7:27-22.19(f)1.ii, I hereby state that this facility is in compliance with all applicable requirements as indicated in the facility specific requirements of my operating permit for the time period listed in Section I.3 above except those applicable requirements listed in the compliance schedule, included in my operating permit pursuant to N.J.A.C. 7:27-22.9(c)7, which includes a sequence of actions with milestones leading to compliance with the applicable requirement.
- ☐ d. Pursuant to N.J.A.C. 7:27-22.19(f)1.iii, I hereby state that this facility is in compliance with all applicable requirements for the time period listed in Section I.3 above as indicated in the facility specific requirements of my operating permit, except for those applicable requirements included in an order or consent decree not incorporated into a compliance schedule.
- ☐ e. Pursuant to N.J.A.C. 7:27-22.19(f)1.iv, I hereby state that this facility is currently not in compliance with at least one applicable requirement in the facility specific requirements of my operating permit, which are listed in the Deviation Summary tab.
- ☐ f. None of the above. This is a semi-annual report.



State of New Jersey
Department of Environmental
Protection

Section IIIa - Summary of Facility and Emission Unit Compliance Status

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Set All Yes/No

Permit Activity ID	Each unit includes ALL Operating Scenarios (OS), Steps (ST), Control Devices (CD), Emission Point (PT), Group (GR) and Equipment (E) listed under that UNIT or BP Emission Unit/Batch Process	Continuous Compliance Throughout the Reporting Period
BOP210001	General Provisions and Authorities	Yes
BOP210001	FC	No
BOP210001	FG1	Yes
BOP210001	IS1	Yes
BOP210001	IS2	Yes
BOP210001	IS3	Yes
BOP210001	IS4	Yes
BOP210001	IS5	Yes
BOP210001	IS6	Yes
BOP210001	IS7	Yes
BOP210001	IS8	Yes
BOP210001	IS9	Yes
BOP210001	GR1	Yes
BOP210001	U1 includes OS0 (OS1, E101, CD1, CD2, CD3, PT1, PT2, PT3)	Yes
BOP210001	U2 includes OS0 (OS2, E201, CD4, CD5, PT5)	Yes
BOP210001	U3 includes OS0 (OS1, OS2, E501, E601, PT6, PT7)	Yes
BOP210001	U4 includes OS0 (OS1, E701, PT8)	Yes
BOP210001	U5 includes OS0 (OS1, OS2, OS3, OS4, OS5, OS6, E901, E902, E903, PT9, PT10, PT11, E921, E922, E923, PT21, PT22, PT23)	Yes
BOP210001	U7 includes OS0 (OS1, E801, PT12)	Yes
BOP210001	U14 includes OS0 (OS1, E14, PT14)	Yes
BOP210001	U15 includes OS0 (OS1, E904, PT15)	Yes
BOP210001	U17 includes OS0 (OS1, E15, PT17)	Yes
BOP210001	U99 includes OS0 (OS1, E99)	Yes
BOP210001	U100 includes OS0 (OS1, OS2, E100, CD 100, CD101, CD102, PT100, PT101)	No
BOP210001	U101 includes OS0 (OS1, E906, PT102)	Yes
BOP210001	FG2	Yes
BOP210001	U102 includes OS0 (OS1, OS2, OS3, E924, E925, E926, PT103, PT104, PT105)	Yes



State of New Jersey
Department of Environmental
Protection

Section IIIb - Summary of Facility and Emission Unit Compliance Status

Section IIIb - Summary of Facility and Emission Unit Compliance Status

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Permit Activity Number	Select the Subject Item(s) from the Operating Permit associated with the Deviation.				Requirement Reference #	Requirement Type	Description of Deviation	Compliance Status at End of the Reporting Period	Was this Deviation Intermittent or Continuous Throughout the Reporting Period?	Deviation Notification / Department Response Status	Compliance Report Type
	SI Type	SI Number	Operating Scenario	Step Number							
BOP210001	U	100	0		23	Applicable (A)	H2S concentration greater than 300 ppmv, (300 ppmv on October 27, 2022, 600 ppmv on November 3, 2022)	In Compliance (IC)	Intermittent	Notification	
BOP210001	FC					Applicable (A)	There was a confirmed odor complaint on 12/28/22 in which residents signed NJDEP "Statements of Complaint" forms.	In Compliance (IC)	Intermittent	None	

Section 111b - Summary of Facility and Emission Unit Compliance Status

Enforcement Action Activity Number	Communication Center Notification Number or Reported Date	Recurring Deviation of Requirement	List all Deviation Dates or Date Ranges	Deviation Discovery Date	Affirmative Defense Requested?	Did the Deviation Result in Excess Emissions?	Estimate the Amount of Emissions below		Describe the steps taken to correct the problem (i.e., steps taken to mitigate excess emissions, equipment repairs, etc.) and the preventive measures employed to avoid future incidents.	Comments
							Type of Contaminants	Amount (lbs.)		
	11/15/2022	Yes	10/27/2022 & 11/3/2022	11/3/2022	No	No			The gas treatment system media was replaced and compliance with the H ₂ S limit was achieved with the next weekly reading (November 10, 2020) with an H ₂ S concentration of 210 ppm.	
		No	12/28/22	12/28/22	No	No			The facility investigated this odor complaint but due to changes in weather conditions, the investigators did not detect the presence of odor at the complaint properties to an enforceable level.	

CERTIFICATION

Facility ID: 70506
Facility Name: Atlantic County Utilities Authority Landfill

Responsible Official:

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information.

Name: Richard Dovey (President) Signature:  Date: 02 / 14 / 2023

Individuals with Direct Knowledge:

I certify under penalty of law that I believe the information provided in this document is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information.

Name: Gary Conover (VP Solid Waste) Signature:  Date: 02 / 14 / 2023
Section Being Certified: All

Name: Amanda Smith (Consultant) Signature:  Date: 02 / 14 / 2023
Section Being Certified: All

Name: _____ Signature: _____ Date: / /
Section Being Certified: _____

Name: _____ Signature: _____ Date: / /
Section Being Certified: _____

